

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

# FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR ORM LIMITED OFFERING EXEMPTION

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Name of Offering (C) check if this is an amendment and name has changed, and indicate change.)	
Adventures of Power LLC  Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)  Type of Filing: New Filing Amendment	ULOE
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)  Adventures of Power LLC	·
Address of Executive Offices (Number and Street, City, State, Zip Code) 217 East 7th Street, PHA, New York, NY 10009	Telephone Number (Including Area Code) 917-445-5806
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business Film Production of a film entitled "Adventures of Power"	PROCESSED
	please specify): FAPR 1 0 2007 lity company
Month Year  Actual or Estimated Date of Incorporation or Organization: 10 05 Actual Estimated Date of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	mated FINANCIAL

### GENERAL INSTRUCTIONS

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

# State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## - ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filling of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

1 of 9

		A BASIC IDE	NTIFICATION DATA	1150 1150	
2. Enter the information re	equested for the fol	lowing:			
• Each promoter of	the issuer, if the iss	suer has been organized w	ithin the past five years;		
<ul> <li>Each beneficial ow</li> </ul>	ner having the pow	er to vote or dispose, or dir	ect the vote or disposition	of, 10% or more of	a class of equity securities of the issuer.
Each executive off	ficer and director o	f corporate issuers and of	corporate general and man	aging partners of	partnership issuers; and
Each general and a	managing partner o	f partnership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
7. 11.21		<del></del> .			
Full Name (Last name first, Grack Films LLC	ir individuai)				•
Business or Residence Addre 217 East 7th Street, PH/	•		ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	✓ General and/or   Managing Partner
Fuil Name (Last name first, Ari Gold	if individual)				1
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)		
Check Box(cs) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ess (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)		<del>-</del>		
Business or Residence Addr	ess (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ess (Number and	Street, City, State, Zip Co	ode)		
	(Use bla	ink sheet, or copy and use	additional copies of this s	heet, as necessary	)

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	77		, or does th		tand to cal		oredited in	vestors in	this offeri	no?		Yes	No <b>IX</b>
1.	Has unc	issuer sold	, or does u			Appendix,							<u></u>
2.	What is	the minim	um investm									s_25,0	00.00
4.												Yes	No
3.											R		
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.											<u>.</u>		
Fu	ll Name (I	Last name	first, if indi	ividual)									
Bu	siness or	Residence	Address (N	lumber and	Street, Ci	tv. State, Z	ip Code)						
Na	me of Ass	sociated Br	oker or Dea	aler									
Sta	tes in Wh	ich Person	Listed Has	s Solicited	or Intends	to Solicit I	urchasers			•			<del></del> -
	(Check	"All States	or check	individual	States)		•••••			***************************************			States
		(AK)	AZ	AR	CA	(CO)	CT	DE	DC	[FL]	GA	НП	ID
	AL)	IN)	IA)	KS	KY	LA	ME	MD	, <u>MA</u>	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	<u>OK</u>	OR	PA
	RÍ	SC	SD	[TN]	TX	UT	VT	VA	WA	wv	WI	WY	PR
Fu	ll Name (	Last name	first, if indi	ividual)									
Bu	siness or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)					<u> </u>	
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NB	me of As	sociated Bi	roker or De	aicr									
Sta			Listed Has		or Intends	to Solicit	Purchasers						
	(Check	"All States											
		All blate.	s" or check	individual	States)		***************************************		*************			☐ All	States
	AL				States)		СТ	DE	DC	FL	<u>G</u> A	☐ All	[D]
	AL IL	AK IN	AZ IA	AR KS	CA KY	CO LA	CT ME	DE MD	DC MA	FL MI	GA MN	HI MS	ID MO
	IL MT	AK IN NE	AZ IA NV	AR KS NH	CA KY NJ	CO LA NM	CT ME NY	DE MD NC	DC MA ND	FL MI OH	GA MN OK	HI MS OR	ID MO PA
	IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY	CO LA	CT ME	DE MD	DC MA	FL MI	GA MN	HI MS	ID MO
Fu	IL MT RI	AK IN NE SC	AZ IA NV	AR KS NH TN	CA KY NJ	CO LA NM	CT ME NY	DE MD NC	DC MA ND	FL MI OH	GA MN OK	HI MS OR	ID MO PA
	IL MT RI II Name (	AK IN NE SC Last name	AZ IA NV SD	AR KS NH TN ividual)	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC	DC MA ND	FL MI OH	GA MN OK	HI MS OR	ID MO PA
Bu	IL MT RI I! Name (	AK IN NE SC Last name	AZ IA NV SD first, if ind	AR KS NH TN ividual)	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC	DC MA ND	FL MI OH	GA MN OK	HI MS OR	ID MO PA
Bu	IL MT RI I! Name (	AK IN NE SC Last name	AZ IA NV SD first, if ind	AR KS NH TN ividual)	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC	DC MA ND	FL MI OH	GA MN OK	HI MS OR	ID MO PA
Bu	IL MT RI I! Name ( usiness or	AK IN NE SC Last name Residence	AZ IA NV SD first, if ind	AR KS NH TN ividual)	CA KY NJ TX ad Street, C	CO LA NM UT City, State, 2	CT ME NY VT	DE MD NC VA	DC MA ND	FL MI OH	GA MN OK	HI MS OR	ID MO PA
Bu	IL MT RI II Name ( Isiness or the of Astronometes in Williams)	AK IN NE SC Last name Residence sociated Be	AZ IA NV SD first, if ind Address (1	AR KS NH TN ividual)	CA KY NJ TX ad Street, C	CO LA NM UT  City, State,	CT ME NY VT  Zip Code)	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA
Bu	IL MT RI	AK IN NE SC  Last name Residence sociated Behich Person "All States	AZ IA NV SD first, if ind Address (I	AR KS NH TN ividual) Number an aler s Solicited individua	CA KY NJ TX ad Street, C	CO LA NM UT  City, State,	CT ME NY VT  Zip Code)	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR
Bu	IL MT RI II Name ( Isiness or the of Astronometes in Williams)	AK IN NE SC Last name Residence sociated Be	AZ IA NV SD first, if ind Address (I	AR KS NH TN ividual)	CA KY NJ TX ad Street, C	CO LA NM UT  City, State,	CT ME NY VT  Zip Code)	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR

# C. OFFERING PRICE NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	Type of Security	Aggregate Offering Price	Amount Already Sold
	•	s 0.00	s 0.00
	Equity	·	s 0.00
	Common   Preferred	<u> </u>	
	Convertible Securities (including warrants)	c 0.00	\$
	Partnership Interests	¢ 0.00	\$ 0.00
	Other (Specify limited liability company interest	2,500,000.00	\$ 1,800,000.00
	Total	2,500,000.00	\$ 1,800,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		<u> </u>
	••		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	;	
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors		\$
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.	i ;	
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total	<del></del>	\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure i not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees	П	\$ 0.00
	Printing and Engraving Costs		\$ 0.00
	Legal Fees		\$ 20,000.00
	Accounting Fees		\$ 0.00
	Engineering Fees		s 0.00
	Sales Commissions (specify finders' fees separately)		\$ 0.00
	Other Expenses (identify)		s 0.00
	Total	_	s 20,000.00
	1.0121		-

	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."	Question 4.a. This difference is the "adjusted gross		2,480,000.00
5.	Indicate below the amount of the adjusted gross pro each of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	y purpose'is not known, furnish an estimate and Tthe payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		s 0.00	<u> 0.00</u>
	Purchase of real estate			S 0.00
	Purchase, rental or leasing and installation of mac and equipment	hinery		\$0.00
	Construction or leasing of plant buildings and fac	ilities	<u> \$ 0.00</u>	S 0.00
	Acquisition of other businesses (including the val offering that may be used in exchange for the asse issuer pursuant to a merger)	ets or securities of another	\$ 0.00	\$ 0.00
	Repayment of indebtedness			s_0.00
	Working capital		\$ <del>0.00</del>	\$ 2,480,000.00
	Other (specify):		□ \$	. [] S
			\$	s
	Column Totals		\$_0.00	\$ 2,480,000.00
	Total Payments Listed (column totals added)	•		480,000.00
(2)		D FEDERAL SIGNATURE		
sig	issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acc	mish to the U.S. Securities and Exchange Commis	ssion, upon writte	ale 505, the following on request of its staff,
Iss	ner (Print or Type)	Signature	Date	
Ac	ventures of Power LLC	I the Gold _ I	March 7 , 2007	
Na	ne of Signer (Print or Type)	Title of Signer (Print or Type)		
Ari	Gold	Managing Member of Grack Films LLC, Mana	aging Member	

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

ESTATE SIGNATURE	Art	是到底的
Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No <b>K</b>

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Adventures of Power LLC	Ari Go VI	March 7 , 2007
Name (Print or Type)	Title (Print or Type)	
Ari Gold	Managing Member of Grack	Films LLC, Managing Member

### Instruction

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

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1	Intend to non-a investor	I to sell eccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State  (Part C-Item 2)			under Sta (if yes, explana	ification ate ULOE attach ation of granted)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK.									
ΑZ									
AR									
CA		×		5	\$900,000.00				
со									
СТ									
DE									
DC					_				
FL					_				
GA									
ні	·								
ID				-					
IL					· _				
IN									
IA									
KS									
KY							<u></u>		
LA									
ME									
MD									
MA									
MI									
MN									
MS									

				APP	ENDIX   4				
1	Intend to sell to non-accredited investors in State (Part B-Item 1)  Type of security and aggregate offering price offered in state (Part C-Item 1)				Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes _	No
МО									
MT									
NE									
NV									
NH									
NJ		×		1	\$200,000.00				
NM									
NY		×		4	\$700,000.0				
NC									
ND									
ОН									
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OR				* .					
PA									
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TN									
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1	Intend to sell to non-accredited investors in State (Part B-Item 1)		to non-accredited investors in State		Type of security and aggregate offering price offered in state (Part C-Item 1)	4  Type of investor and amount purchased in State (Part C-Item 2)				under St (if yes, explan waiver	lification ate ULOE , attach ation of granted)
State	Yes	No	,	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
PR		-									